## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

20711-0032

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |              |                               |  |                       |        | SMALL ENTITY TYPE   |                        | OTHER THAN |                     |                        |
|--|--|---|--------------|-------------------------------|--|-----------------------|--------|---------------------|------------------------|------------|---------------------|------------------------|
| TOTAL CLAIMS   |  |   |              |                               |  | V. or half to his day |        |                     |                        | OR         |                     |                        |
| TOTALOBAINO  |  |   | 28           |                               | त्र प्रमुक्ते के क्षेत्र के क्षेत्र के किया है।<br>इस क्षेत्र के किया के क्षेत्र के किया |                       |        | RATE                | FEE                    |            | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED |                               | NUMB   | NUMBER EXTRA          |        | BASIC FEE           | 375.00                 | OR         | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 2g minus 20= |                               | . 8  |                       |        | X\$ 9=              |                        | OR         | X\$18=              | 140                    |
| INDEPENDENT CLAIMS   |  |   | 2 minus 3 =  |                               | 6  |                       |        | X42=                |                        | OR         | X84=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |              |                               |  |                       | j      | +140=               |                        | OR         | +280=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column   |  |   |              |                               |  | column 2              |        | TOTAL               |                        | OR         | TOTAL               | 872                    |
| CLAIMS AS AMENDED - PART II  |  |   |              |                               |  |                       |        |                     |                        |            | OTHER THAN          |                        |
| 6  | 29-06  | (Column 1)                                |              | (Colu                         |  | (Column 3)            | ١.     | SMALL               |                        | OR         | SMALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | <u> </u>     | HIGH<br>NUM<br>PREVIO<br>PAID | BER  | PRESENT<br>EXTRA      |        | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | . 28                                      | Minus        | ** 2                          | 8  | = 0                   |        | X\$ 9=              |                        | OR         | X\$18=              | 0                      |
|  | Independent                                    | * J                                       | Minus        | ***                           | 3  | - 0                   |        | X42=                |                        | OR         | X84=                | 0                      |
| _  | FIRST PRESE                                    | MATION OF MI                              | JETIPLE DEF  | ENDEN                         | CLAIM  | الا                   | 1      | +140=               |                        | OR         | +280=               | 6                      |
|  |  |   |              |                               |  |                       |        | TOTAL<br>ADDIT, FEE |                        | OR         | TOTAL<br>ADDIT, FEE | Ö                      |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                               |  |                       |        |                     |                        |            |                     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVI                  | HEST<br>IBER<br>OUSLY<br>FOR   | PRESENT<br>EXTRA      | ] [    | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus        | **                            |  | =                     |        | X\$ 9=              |                        | OR         | X\$18=              |                        |
|  | Independent                                    |   | Minus        | ***                           |  | =                     |        | X42=                |                        | OR         | X84=                |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |  |                       |        |                     |                        |            |                     |                        |
|  |  |   |              |                               |  |                       |        | +140=               |                        | OR         | +280=               |                        |
|  |  |   |              |                               |  |                       |        | TOTAL<br>ADDIT, FEE |                        | OR         | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                               |  |                       |        |                     |                        |            |                     |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVI                  | HEST<br>HBER<br>OUSLY<br>FOR   | PRESENT<br>EXTRA      |        | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus        | **                            |  | =                     |        | X\$ 9=              |                        | OR         | X\$18=              |                        |
|  | Independent                                    | *   | Minus        | AAA                           |  | -                     | 11     | X42=                |                        | OR         | X84=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |  |                       |        | 110                 |                        |            | -000                |                        |
| <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> </ul>  |  |   |              |                               |  |                       |        | +140=<br>TOTAL      | •                      | OR         | +280=<br>TOTAL      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE |  |   |              |                               |  |                       |        |                     |                        | OR         | ADDIT. FEE          | لــــا                 |
|  |  | nber Previously Pa                        |              |                               |  |                       | er fou | ind in the app      | propriate box          | k in co    | lumn 1.             |                        |